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Bib Data Sheet

CONFIRMATION NO. 1585

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/731,994 | <b>FILING DATE</b><br>12/07/2000<br><b>RULE</b> | <b>CLASS</b><br>386 | <b>GROUP ART UNIT</b><br>2615 | <b>ATTORNEY<br/>DOCKET NO.</b><br>450100-02879 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

Yasumasa Kodama, Tokyo, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 11-349090 12/08/1999

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED \*\* 01/17/2001

|   |                                      |                                |                               |                                    |
|---|--------------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no  | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWING</b><br>9 | <b>TOTAL<br/>CLAIMS</b><br>10 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                      |                                |                               |                                    |
| Verified and<br>Acknowledged  | Examiner's Signature                 | Initials                       |                               |                                    |

## ADDRESS

William S. Frommer, Esq.  
FROMMER LAWRENCE & HAUG LLP  
745 Fifth Avenue  
New York, NY 10151

## TITLE

Data recording and reproducing apparatus and data recording and reproducing method

|                                       |   |   |
|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>840 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                     |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                      |
|                                       |   | <input type="checkbox"/> Other _____                              |
|                                       |   | <input type="checkbox"/> Credit                                   |